
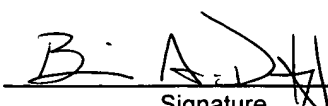


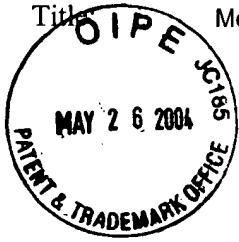
|   |   |   |                         |
|---|---|---|-------------------------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>   |   | Docket Number (Optional)<br>067439.0138 |                         |
|    | In re Application of <b>Edward J. Stashluk, Jr., et al.</b>           |   |                         |
|   | Application Number <b>10/697,485</b>                                  |   | Filed <b>09/16/2003</b> |
|   | For <b>Merchandise Return System with Value</b> * <b>see attached</b> |   |                         |
|   | Group Art Unit <b>1733</b>  |   | Examiner                |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 70%;"> <p><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</p> <p><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</p> <p><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</p> <p><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</p> <p><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ <b>210</b></p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <b>50-2148</b></p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p style="margin-left: 40px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br/>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent of record.</p> <p style="margin-left: 40px;"><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).<br/>Registration number if acting under 37 CFR 1.34(a) _____</p> </div> <div style="width: 25%; text-align: right;"> <p>\$ _____</p> <p>\$ <b>420</b> _____</p> <p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p> </div> </div> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p><u>May 26, 2004</u></p> <p>Date</p> <p>PTO Reg No.: 44,656</p> </div> <div style="width: 45%; text-align: center;"> <br/>                 Signature<br/> <u>Brian A. Dietzel</u><br/>                 Typed or printed name             </div> </div> <p><small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small></p> |   |   |                         |
| <input type="checkbox"/> Total of _____ forms are submitted.  |   |   |                         |

**BAKER BOTTS** LLP

Attorney Docket Number: 067439.0138

Title

Merchandise Return System with Value Added Returns Processing (Data Communications)



Use Space Below for Additional Information: